

# BEST AVAILABLE COPY

JAN 26, 2006 08:51 FR THOMSON LICENSING 609 734 6888 TO B, 15712738300, 53 P.02

Approved for use through 07/31/2006. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

## FEET TRANSMITTAL for FY 2005

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ ) 120.00

Complete if Known

Application Number 08/936,415

Filing Date 09/12/2001

First Named Inventor Eskicoglu, et al.

Examiner Name Longbil Chai

Art Unit 2131

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JAN 26 2006

### METHOD OF PAYMENT (check all that apply)

Check  Credit card  Money Order

None

Other (please identify): \_\_\_\_\_

Customer Number 24498

Deposit Account: Deposit Account Number 02-0932

Deposit Account Name: THOMSON LICENSING INC.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below

Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.18 and 1.17

Credit any overpayments

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### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES |          | SEARCH FEES |          | EXAMINATION FEES |          |
|------------------|-------------|----------|-------------|----------|------------------|----------|
|                  | Fee (\$)    | Fee (\$) | Fee (\$)    | Fee (\$) | Fee (\$)         | Fee (\$) |
| Utility          | 300         | 150      | 500         | 250      | 200              | 100      |
| Design           | 200         | 100      | 100         | 50       | 130              | 65       |
| Plant            | 200         | 100      | 300         | 150      | 160              | 80       |
| Reissue          | 300         | 150      | 500         | 250      | 600              | 300      |
| Provisional      | 200         | 100      | 0           | 0        | 0                | 0        |

#### 2. EXCESS CLAIM FEES

##### Fee Description

Each claim over 20 (including Reissues)

Small Entity

Fee (\$)

Fee (\$)

50

25

Each independent claim over 3 (including Reissues)

200

100

Multiple dependent claims

360

180

Total Claims

Extra Claims

Fee (\$)

Fee Paid (\$)

Multiple Dependent Claims

Fee (\$)

Fee Paid (\$)

- 20 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of total claims paid for, if greater than 20.

##### Independent Claims

Extra Claims

Fee (\$)

Fee Paid (\$)

- 3 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of independent claims paid for, if greater than 3.

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(e).

| Total Sheets  | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|---|--------------|--|----------|---------------|
| - 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____ |              |  |          |               |

#### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Fees Paid (\$)

Other (e.g., late filing surcharge): One Month Extension

\$120.00

#### SUBMITTED BY

|                   |                     |                                      |         |           |                |
|-------------------|---------------------|--------------------------------------|---------|-----------|----------------|
| Name (Print/Type) | Paul P. Kiel        | Registration No.<br>(Attorney/Agent) | 40,627  | Telephone | (609) 734-6815 |
| Signature         | <i>Paul P. Kiel</i> |                                      | 1/25/06 |           |                |

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to be (and by the USPTO to process) an application. Confidentiality is protected by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to require about 1 hour to complete. Please direct comments regarding this burden estimate or any other aspect of the collection to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, 1401, 14th Street, N.W., Box 429, Washington, D.C. 20545-0001. Docket No. 15712738300. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-6169 and select option 2.

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JAN 26 2006 08:51 FR THOMSON LICENSING 609 734 6888 TO 8,15712738300,53 P.01

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|   |  |  |
|---|--|--|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>   |  | Docket Number (Optional)<br>RCA 89,462 -Customer No. 24498 |
| In re Application of Eskicioglu, et al.                       |  |  |
| Application Number 09/936,415 Filed 09/12/2001                |  |  |
| For A GLOBAL COPY PROTECTION SYSTEM FOR DIGITAL HOME NETWORKS |  |  |
| Art Unit 2131 Examiner Longbit Chai                           |  |  |

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- |   |          |
|---|----------|
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))   | \$120.00 |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))   | \$_____  |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))   | \$_____  |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))  | \$_____  |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))  | \$_____  |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$_____.      |          |
| <input type="checkbox"/> A check in the amount of the fee is enclosed.  |          |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.   |          |
| <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.  |          |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>07-0832</u> . |          |
| I have enclosed a duplicate copy of this sheet.   |          |
| I am the <input type="checkbox"/> applicant/inventor.   |          |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71   |          |
| Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).   |          |
| <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>40,677</u>  |          |
| <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).  |          |
| Registration number if acting under 37 CFR 1.34(a). _____.  |          |

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1/25/06

Date

(609) 734-6815

Telephone Number

Paul P. Kiel

Signature

Paul P. Kiel

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

- Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minutes to complete. The amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1460.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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